

FEC FORM 9**24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations**

(a) Name

Colorado for Life

(b) Address (number and street) ☐ check if different than previously reported

P.O. Box 1091

(c) City, State and ZIP Code

Longmont, CO 80502

(d) Name of Employer or Principal Place of Business

NA

(e) Occupation

NA

2. FEC Identification Number

C 3 0 0 0 0 6 2 4

3. Is This Statement☐ New

or

☒ Amended**4. Covering Period**

10/11/2006

through

10/24/2006

5. (a) Date of Public Distribution(s)

10/24/2006

(b) Communication Title

"Water", "Pay", "Raise", & "Worse"

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10?Yes ☐No ☒**7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?**Yes ☒No ☐**8. Custodian of Records**

(a) Name

Julie Wells

(b) Address (number and street)

3165 S. Wadberry Way

(c) City, State and ZIP Code

Denver, CO 80231

(d) Name of Employer or Principal Place of Business

Self

(e) Occupation

Bookkeeper

9. Total Donations This Statement

0 0 0

10. Total Disbursements/Obligations This Statement

6 9 7 5 0 0 0 0

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Julie N. Wells

SIGNATURE

DATE

11-1-06

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.